

UTILITY PATENT APPLICATION TRANSMITTAL

DUPLICATE

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|---|---|----------------|
| Address to: Box PATENT APPLICATION Commissioner of Patents P.O. Box 1450 Alexandria, VA 22313-1450 | Attorney Docket No. | HSIE3036/EM |
| | First Named Inventor (or identifier) | Wu-Chang HSIEH |
| | Total Pages | 35 |

Transmitted herewith is a patent application under 37 CFR 1.53(b).

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| Entitled: | Improved Multifunctional Drinking Cup Structure |
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- ☒ 1. Submitted herewith are the following:
- 14 pages of specification, including claims and Abstract.
 - 15 sheets of FORMAL drawings (Figs. 1-15).
 - 20 claims.
 - 1 Oath/Declaration signed by each inventor.
 - 1 Application Data Sheet.
 - 1 check in the amount of \$573 (\$385- Filing Fee; \$43- Extra Independent Claim Fee; \$145- Multiple Dependent Claim Fee).
- ☒ 2. SMALL ENTITY STATUS IS ASSERTED pursuant to 37 CFR 1.27 for this application.
- ☒ 3. The Commissioner is authorized to credit any overpayment and charge any deficiency in any fees required under 37 CFR 1.16 and/or 1.17, to Deposit Account No. 02-0200.
- ☐ 4. Insert before the first sentence of the specification: - - This application claims the benefit of provisional application number _____ filed _____. - -
- ☐ 5. Insert before the first sentence of the specification: - - This application is a Continuation-in-part of nonprovisional application number _____ filed _____. - -
- ☐ 6. Other: _____

The registered practitioners representing applicant(s) are J. Ernest Kenney, Reg. No. 19,179; Eugene Mar, Reg. No. 25,893; Richard E. Fichter, Reg. No. 26,382; Thomas J. Moore, Reg. No. 28,974; Joseph DeBenedictis, Reg. No. 28,502; and Benjamin E. Urcia, Reg. No. 33,805.

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|---|----|--------------------|------|--|------------|
| THE FILING FEE IS CALCULATED AS FOLLOWS: | | | | Basic Fee: | \$770.00 |
| Total Claims: | 20 | - 20 = | 0 | X \$18 = | \$0.00 |
| Independent Claims: | 4 | - 3 = | 1.00 | X \$86 = | \$86.00 |
| Correspondence Address: BACON & THOMAS, PLLC 625 Slaters Lane, 4 th Floor Alexandria, VA 22314-1176 | | | | Multiple Dependent Claim (add \$290.00): | \$290.00 |
| | | | | Subtotal: | \$1,146.00 |
| | | | | 50% Reduction if Small Entity Status: | \$573.00 |
| Phone: 703-683-0500 Fax: 703-683-1080 | | | | Total: | \$573.00 |
| Date: | | Name: | | Signature: | |
| October 15, 2003 | | Richard E. Fichter | | Richard E. Fichter | |
| | | | | Reg. No. | 26,382 |

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